

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**LIBERTARIAN PARTY OF NORTH CAROLINA**

ADDRESS (number and street) **PO BOX 28141**  
Check if different than previously reported. (ACC) **RALEIGH NC 27611**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00525758** 3. IS THIS REPORT NEW (N) OR AMENDED (A)  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  07 01 2016 through  /  /  09 30 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Lake, Ralph, , ,  
Type or Print Name of Treasurer

Signature of Treasurer Lake, Ralph, , , [Electronically Filed] Date  /  /  10 27 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**LIBERTARIAN PARTY OF NORTH CAROLINA**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="3249.56"/>	<input type="text" value="3249.56"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="3249.56"/>	<input type="text" value="3249.56"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3249.56"/>	<input type="text" value="3249.56"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**  
  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**LIBERTARIAN PARTY OF NORTH CAROLINA**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3249.56	3249.56
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3249.56	3249.56
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	3249.56	3249.56
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	3249.56	3249.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3249.56	3249.56

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	0.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	0.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	3249.56	3249.56
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3249.56	3249.56
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**LIBERTARIAN PARTY OF NORTH CAROLINA**

**A. Clifford, Alexandra, , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Khakum Wood Road  
 City Greenwich State CT Zip Code 06831  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 95.83

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2016  
**Transaction ID : SA11AI.4145**  
 Amount of Each Receipt this Period  
 95.83  
 Memo Item  
 Undistributed JFA Receipt

**B. Clifford, Scott, , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Khakum Wood Road  
 City Greenwich State CT Zip Code 06831  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Redwood Bay Investors LLC Occupation (for Individual) Finance  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 95.83

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2016  
**Transaction ID : SA11AI.4143**  
 Amount of Each Receipt this Period  
 95.83  
 Memo Item  
 Undistributed JFA Receipt

**C. Dacus, David, , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 609 Mission St #400  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Tech Entrepreneur  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 95.83

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 01 / 2016  
**Transaction ID : SA11AI.4141**  
 Amount of Each Receipt this Period  
 95.83  
 Memo Item  
 Undistributed JFA Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN PARTY OF NORTH CAROLINA**

**A. Dake, Brad, , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 757

City Caroga Lake	State NY	Zip Code 12032
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Stewarts Shops Corp	Occupation (for Individual) Business Owner
----------------------------------------------------------	-----------------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
929.17

Date of Receipt  
 09 / 12 / 2016  
**Transaction ID : SA11AI.4131**

Amount of Each Receipt this Period  
 929.17

Memo Item  
 Undistributed JFA Receipt

**B. Day, Robert, , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 729 Bel Air Road

City LosAngeles	State CA	Zip Code 90077
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Oakmont Corporation	Occupation (for Individual) CEO
----------------------------------------------------------	------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1970.83

Date of Receipt  
 09 / 08 / 2016  
**Transaction ID : SA11AI.4119**

Amount of Each Receipt this Period  
 1970.83

Memo Item  
 Undistributed JFA Receipt

**C. Diker, Charles, , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 944 5th Ave

City NYC	State NY	Zip Code 10019
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Investor	Occupation (for Individual) Manager
-----------------------------------------------	----------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
929.17

Date of Receipt  
 09 / 09 / 2016  
**Transaction ID : SA11AI.4127**

Amount of Each Receipt this Period  
 929.17

Memo Item  
 Undistributed JFA Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN PARTY OF NORTH CAROLINA**

**A. Farrell, Olivia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2307 Weare Road  
 City Henniker State NH Zip Code 03242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2016  
**Transaction ID : SA11AI.4106**  
 Amount of Each Receipt this Period  
 6.09  
 Memo Item  
 Undistributed JFA Receipt

**B. Ferenbach, Carl, , , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 Commonwealth Ave  
 City Boston State MA Zip Code 02116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 High Meadows Foundation Chairman  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 14 / 2016  
**Transaction ID : SA11AI.4123**  
 Amount of Each Receipt this Period  
 1137.50  
 Memo Item  
 Undistributed JFA Receipt

**C. Galen, Helene, , , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37791 Halpen Dr  
 City Rancho State CA Zip Code 92270  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Homemaker Homemaker  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2016  
**Transaction ID : SA11AI.4147**  
 Amount of Each Receipt this Period  
 95.83  
 Memo Item  
 Undistributed JFA Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6.09
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN PARTY OF NORTH CAROLINA**

**A. Jameson, James, , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 2028  
 City Delmar State CA Zip Code 92014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Executive  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 304.17

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2016  
**Transaction ID : SA11AI.4139**  
 Amount of Each Receipt this Period  
 304.17  
 Memo Item  
 Undistributed JFA Receipt

**B. Joel, Lawson, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 888 Parkes Run Lane Villanova  
 City Villanova State PA Zip Code 19085  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 652.17

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2016  
**Transaction ID : SA11AI.4108**  
 Amount of Each Receipt this Period  
 652.17  
 Memo Item  
 Undistributed JFA Receipt

**C. Joel, Lawson, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 888 Parkes Run Lane Villanova  
 City Villanova State PA Zip Code 19085  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1086.95

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2016  
**Transaction ID : SA11AI.4109**  
 Amount of Each Receipt this Period  
 434.78  
 Memo Item  
 Undistributed JFA Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1086.95
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN PARTY OF NORTH CAROLINA**

**A. Offerdahl, Richard, , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 593 Lariat Circle  
 City Incline Village State NV Zip Code 89451  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Maxir Corp Occupation (for Individual) Manager  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1970.83

Date of Receipt 09 / 09 / 2016  
**Transaction ID : SA11AI.4121**  
 Amount of Each Receipt this Period 1970.83  
 Memo Item  
 Undistributed JFA Receipt

**B. Ohnell, Ernst, , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Khakum Wood Road  
 City Greenwich State CT Zip Code 06831  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Investing Occupation (for Individual) Self-Employed  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 304.17

Date of Receipt 09 / 08 / 2016  
**Transaction ID : SA11AI.4135**  
 Amount of Each Receipt this Period 304.17  
 Memo Item  
 Undistributed JFA Receipt

**C. Pritzker, Anthony, , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1261 Angelo Dr  
 City Beverly Hills State CA Zip Code 90210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sheridan Place LLC Occupation (for Individual) Manging Director  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼ 4054.17

Date of Receipt 09 / 02 / 2016  
**Transaction ID : SA11AI.4115**  
 Amount of Each Receipt this Period 4054.17  
 Memo Item  
 Undistributed JFA Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN PARTY OF NORTH CAROLINA**

**A. Quattrone, Frank, , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 765 Market St  
 City San Francisco State CA Zip Code 94103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) M&A Advisor Occupation (for Individual) QATALYST  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4054.17

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2016  
**Transaction ID : SA11AI.4117**  
 Amount of Each Receipt this Period  
 4054.17  
 Memo Item  
 Undistributed JFA Receipt

**B. Rems, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 Stone Bridge Lane  
 City Milton State MA Zip Code 02186  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Investor  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1404.35

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 31 / 2016  
**Transaction ID : SA11AI.4102**  
 Amount of Each Receipt this Period  
 1404.35  
 Memo Item  
 Undistributed JFA Receipt

**C. Rufer, Chris, , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 724 Main St.  
 City Woodland State CA Zip Code 95695  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Morning Star Corp Occupation (for Individual) Owner  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 06 / 2016  
**Transaction ID : SA11AI.4111**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 Undistributed JFA Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1404.35
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN PARTY OF NORTH CAROLINA**

**A. Steele, Charles, , , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 105  
 City Markham State VA Zip Code 22643  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Mercury, LLC Occupation (for Individual) Consultant  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 8.69

Date of Receipt 09 / 06 / 2016  
**Transaction ID : SA11AI.4149**  
 Amount of Each Receipt this Period 8.69  
 Memo Item  
 Undistributed JFA Receipt

**B. Steinmetz, Arthur, , , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 225 Liberty Street  
 City New York State NY Zip Code 10281  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Chairman Occupation (for Individual) Oppenheimewr Funds  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 720.83

Date of Receipt 09 / 21 / 2016  
**Transaction ID : SA11AI.4133**  
 Amount of Each Receipt this Period 720.83  
 Memo Item  
 Undistributed JFA Receipt

**C. Tisch, James, , , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 926 5th Ave  
 City NYC State NY Zip Code 10021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Berkshire Partners Occupation (for Individual) Exec.  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 929.17

Date of Receipt 09 / 09 / 2016  
**Transaction ID : SA11AI.4125**  
 Amount of Each Receipt this Period 929.17  
 Memo Item  
 Undistributed JFA Receipt

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN PARTY OF NORTH CAROLINA**

**A. Varner, Kyle, , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5905 W Rutter Pkwy  
 City Spokane State WA Zip Code 99208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Physician Occupation (for Individual) Self Employed  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 304.17

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2016  
**Transaction ID : SA11AI.4137**  
 Amount of Each Receipt this Period  
 304.17  
 Memo Item  
 Undistributed JFA Receipt

**B. Wachenheim, Edgar, , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 95 Rye Road  
 City Rye State NY Zip Code 10580  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Greenhaven Associates Inc. Occupation (for Individual) Investment Management  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 929.17

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2016  
**Transaction ID : SA11AI.4129**  
 Amount of Each Receipt this Period  
 929.17  
 Memo Item  
 Undistributed JFA Receipt

**C. Wenberg, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Skyridge Rd  
 City Greenwich State CT Zip Code 05456  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 752.17

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 08 / 2016  
**Transaction ID : SA11AI.4104**  
 Amount of Each Receipt this Period  
 752.17  
 Memo Item  
 Undistributed JFA Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	752.17
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 14  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN PARTY OF NORTH CAROLINA**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Yass, Jeff, , , , ,

Mailing Address 401 E. City Avenue Suite 220

City Bala Cynuyd	State PA	Zip Code 19004
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIG	Occupation (for Individual) Trader
------------------------------------------	---------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 06 / 2016

**Transaction ID : SA11AI.4113**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Undistributed JFA Receipt

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3249.56